Recipient Committee Campaign Statement **Cover Page** (Government Code Sections 84200-84216.5)

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COVER PAGE CALIFORNIA FORM

		Statement covers period	Date of election if applicable:	I JAM NI	· 기본 등 전 전 기본 경기 등 기본 경기 등 경기 등 경기 등 전 기본 등
		10/22/06	(Month, Day, Year)	C4 PM	For Official Use Only
		from		CITY CLERK CITY OF LODI	*· 33
==	INSTRUCTIONS ON REVERSE	12/31/06	11/07/06	CITY OF ERK	
	EINOTROCTIONS ON REVERSE	through		LODI	L.
	Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
		rimarily Formed Ballot Measure	▼ Preelection Statement		Quarterly Statement
	0	committee	Semi-annual Statemen	t 🖂 🖯	Special Odd-Year Report
	Recall (Also Complete Part 5)	Controlled Sponsored	✓ Termination Statement		Supplemental Preelection
	,,	Uso Complete Part 6)	(Also file a Form 410 T	,	Statement - Attach Form 495
	General Purpose Committee	rimorib: Formed Condidate/	Amendment (Explain t	pelow)	
		rimarily Formed Candidate/ officeholder Committee			
		ilso Complete Part 7)			
	O r difficult any room at Committee				
ď		. NUMBER 287307	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
	Committee to Elect Steve Jarrett		Jeff Downing		
			MAILING ADDRESS		
			305 E. Kettleman Lane		
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE Z	IP CODE AREA CODE/PHONE
	214 W. Lockeford St.		Lodi		5240 (209) 327-2669
	CITY STATE ZIP CO		NAME OF ASSISTANT TREASU	IRER, IF ANY	
	Lodi Ca 95240	(209) 329-7133			
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	ox	MAILING ADDRESS		
	CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE Z	IP CODE AREA CODE/PHONE
	CITY SIME ZIP CO	AREA CODE/FHONE	CITT	SIMIE 2	AREA CODE/FRONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADD	RESS	
	(866) 667-2235			ra in the same and the same that the	
	Verification				
•	I have used all reasonable diligence in preparing and reviewing	this statement and to the best of my know	wledge the information contained he	erein and in the attached sch	nedules is true and complete. I certify

under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on	12/31/06	By Alfred
	Date	Signature of Treasurer or Assistant Treasurer
Executed on	12/31/06	By
	Date	Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
Executed on		Ву
	Date	Signature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on		Bv
	Date	Signature of Controlling Officeholder, Candidate, State Measure Proponent



Recipient Committee Campaign Statement Cover Page — Part 2

and the Best States	COVER	PAGE - PAR	Τ2
	ORNIA ORM	460)
Page _	2	of 16	

Officeholder or Candidate Contro	olled Committe	6.	Primarily Formed Ballo	t Measure Committe	е		
NAME OF OFFICEHOLDER OR CANDIDATE			to transport of the continued accommo	NAME OF BALLOT MEASURE			
Stephen A. Jarrett							
OFFICE SOUGHT OR HELD (INCLUDE LOCATI	ON AND DISTRICT N	JMBER IF APPLICABLE)	(Anautorial and allegation	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
Council Member, City of Lodi							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND	STREET) CITY	STATE	ZIP				
844 Virginia Ave	Lodi	Ca. 952	242	Identify the controlling offi	ceholder, candidate, or	state measure	proponent, if any
				NAME OF OFFICEHOLDER, CAN	DIDATE, OR PROPONENT		
Related Committees Not Include not included in this statement that are concontributions or make expenditures on be	trolled by you or ar	e primarily formed to		OFFICE SOUGHT OR HELD		DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D	. NUMBER	Siddy-relia ngave-mentaphysidysidysida				
NAME OF TREASURER		NTROLLED COMMITTEE	7	. Primarily Formed Cand			
NAME OF TREASURER		YES NO	- 1	officeholder(s) or candidate(s)) for which this committee	is primarily form	red.
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)		Nach (Magent Spirit Amagen Magen	NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SC	DUGHT OR HELD	SUPPORT OPPOSE
CITY	TATE ZIP CODE	AREA CODE/	PHONE	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SC	OUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	Tin	. NUMBER					D OFFOSE
				NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SC	OUGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CC	ONTROLLED COMMITTEE	E?	NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SC	OUGHT OR HELD	☐ SUPPORT
		YES NO					OPPOSE
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)						
CITY	TATE ZIP CODE	AREA CODE/	/PHONE	Attac	ch continuation sheets in	f necessary	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Attac	in continuation sneets h	necessary	

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

| Statement covers period | 1022/06 | CALIFORNIA | 460 | FORM | 12/31/06 | Page 3 of 16 | I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee to Elect Steve Jarrett 1287307 Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 12460.88 6658.88 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date <3800.00> 00.00 2858.88 12460.88 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 Received 00.00 00.00 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 2858.88 12460.88 Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 4436.61 12,460.88 6. Payments Made Schedule E, Line 4 Candidates 00.00 00.00 22. Cumulative Expenditures Made* 4436.61 12460.88 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) 00.00 00.00 Date of Election Total to Date 00.00 (mm/dd/yy) 00.00 10. Nonmonetary Adjustment Schedule C, Line 3 4436.61 12460.88 **Current Cash Statement** 1577.73 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add 2858.88 amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 00.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 4436.61 15. Cash Payments Column A, Line 8 above Column A may be negative 00.00 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 00.00 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 00.00 18. Cash Equivalents See instructions on reverse \$ __ 00.00 FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _ FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Steve Jarrett

1.D. NUMBER 1287307

Oommintee	C to Elect State duriett				1207	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/06	Waste Management & affiliated entities 915 L. St., Suite 1430 Sacramento, Ca. 95814	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	
10/23/06	J. Jeffery & Carol Kirst 109 River Meadows Dr. Woodbridge, Ca. 95258	☑IND □COM □OTH □PTY □SCC	REALTOR/Developer	500.00	500.00	
10/23/06	Cleo B. Kirst 1300 Midvale Rd. Lodi, Ca. 95240	☑IND □COM □OTH □PTY □SCC	Retired	500.00	500.00	
10/23/06	Gannon Plumbing, Inc. P.O. Box 359 Ripon, Ca. 95366	□IND □COM ☑OTH □PTY □SCC		189.00	189.00	
10/23/06	Daniel & Cheryl Smith III 11621 Clayton Rd. San Jose, Ca. 95127	IND COM OTH PTY	Investor	189.99	189.00	
			SUBTOTALS	1628.00		
Schedule	A Summary				*Contributor (Codes

Schedule A Summary

- Amount received this period itemized monetary contributions.

 (Include all Schedule A subtotals.)

 \$
 4128.00
- 2. Amount received this period unitemized monetary contributions of less than \$100\$

*Contributor Codes

IND - Individual

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFO		460
from	1022/06	FOF	RM	400
through	12/31/06	Page	5	of 16

NAME OF FILER

Committee to Elect Steve Jarrett

I.D. NUMBER 1287307

SCHEDULE A (CONT)

Committee	to Elect Steve darrott		120.00.						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)			
10/23/06	David Kirsten P.O. Box 2607 Lodi, Ca. 95241	☑IND □COM □OTH □PTY □SCC	Kirsten Company, LLC	100.00	100.00				
10/23/06	Dennis Bennett P.O. Box 1597 Lodi, Ca. 95241	☑IND □COM □OTH □PTY □SCC	Builder/Developer	1000.00	1000.00				
10/23/06	Kevin Van Steenberge 1208 Devine Dr. Lodi, Ca. 95240	☑IND □COM □OTH □PTY □SCC	Lodi Iron Works	100.00	100.00				
10/26/06	Kirk & Cathy Delamare 7444 River Nine Dr. Modesto, Ca. 95356	ZIND COM OTH PTY SCC	Mid-Valley Engeering	200.00	200.00				
11/01/06	David Kirsten P.O. Box 2607 Lodi, Ca. 95241	☑IND □COM □OTH □PTY □SCC	Kirsten Company, LLC	200.00	300.00				
	SUBTOTAL\$ 1600.00								

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHE	DULE A (CONT.)
State from	ment covers period 1022/06	CALIFORNI FORM	^A 460
through	12/31/06	Page 6	of 16

NΔ	ME	OF	FII	FR

Committee to Flect Steve Jarrett

I.D. NUMBER
1287307

Committee	Committee to Elect Steve Sairett							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
11/02/06	Ivan Suess 1845 Lakeshore Dr. Lodi, Ca. 95242	☑IND □COM □OTH □PTY □SCC	REALTOR	100.00	100.00			
11/15/06	Stephen A. Jarrett 844 Virginia Ave Lodi, Ca. 95242	☑IND □COM □OTH □PTY □SCC	REALTOR	800.00	800.00			
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 900.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Sched	ule	B-	Part	1
Loans	Rec	eiv	ed	

*Amounts forgiven or paid by another party also must be reported on Schedule A.

** If required.

Type or print in ink.

SCHEDULE B-PART 1

Loans Received	Amo	to whole dollar			from102	22/06	CALIFORN FORM	^{IA} 460
SEE INSTRUCTIONS ON REVERSE					through12	2/31/06	Page7	of16
NAME OF FILER				raumana siinista marailin siin mine marailin mine marailin mine marailin marailin marailin mine marailin mine m			I.D. NUMBER	ik uzun ere (Konneko ere) elem 100 kin gehannik uzun pubusu uzun kuzun kenen (Konh
Committee to Elect Steve Jarrett							1287307	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVE THIS PERIO	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
	REALTOR Nor-Cal Realty Solutions			\$ 3000.00		% RATE	\$ <u>3800.00</u>	\$ 3800.00 PER ELECTION**
†☑ IND □ COM □ OTH □ PTY □ SCC		\$_3800.00	\$	\$800.00	DATE DUE	\$00.00	07/10/06 DATE INCURRED	s
				PAID \$FORGIVEN	\$	RATE	\$	\$PER ELECTION *
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				\$ FORGIVEN	\$	%	\$	\$PER ELECTION*
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS S	00.00	\$ 3800.0	00.00	\$ 00.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loans				\$ _	00.00		Contributor Codes	
Loans paid or forgiven this period (Total Column (c) plus loans under \$100				\$	3800.00	- C	ND – Individual OM – Recipient Co (other than	ommittee PTY or SCC)
(Include loans paid by a third party that 3. Net change this period. (Subtract Line Enter the net here and on the Summary	are also itemized on Scheo			. NET \$ _	<3800.00> (May be a negative number)	P	OTH – Other (e.g., TY – Political Part CC – Small Contri	y

We have a second of the second						SCH	EDULE B-PART 2
Schedule B – Part 2 Loan Guarantors		Type or print in ink. Amounts may be rounded to whole dollars.		Statem from	ent covers period 10/22/06	CALIFORM FORM	460
SEE INSTRUCTIONS ON REVERSE				th rough .	12/31/06		of
Committee to Elect Steve Jarrett						1.D. NUMBER 1287307	
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN		AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	□IND □COM		LENDER			CALENDAR YEAR	
	□OTH □PTY		DATE			PER ELECTION (IF REQUIRED)	
	□scc					\$	
	□IND □COM		LENDER			\$	
	□OTH □PTY		DATE			PER ELECTION (IF REQUIRED)	
	□scc					\$CALENDAR YEAR	
	□IND □COM		LENDER			\$PER ELECTION	
	□OTH □PTY □SCC		DATE			(IF REQUIRED)	
						CALENDAR YEAR	

☐IND ☐COM

OTH

□ PTY

LENDER

DATE

SUBTOTAL \$

PER ELECTION (IF REQUIRED)

Enter on Summary Page, Line 17 only.

Schedule C **Nonmonetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE C Statement covers period CALIFORNIA 10/22/06 **FORM** from 12/31/06 _ of 14 through. I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee to Elect Steve Jarrett 1287307 CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION FULL NAME, STREET ADDRESS AND CONTRIBUTOR **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TO DATE ZIP CODE OF CONTRIBUTOR CODE * GOODS OR SERVICES CALENDAR YEAR RECEIVED (IF SELF-EMPLOYED, ENTER VALUE (IF REQUIRED) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (JAN 1 - DEC 31) NAME OF BUSINESS) COM HTOTH PTY SCC TIND COM MOTH PTY SCC TIND COM OTH PTY SCC **IND** COM OTH PTY SCC SUBTOTAL \$ 00.00 Attach additional information on appropriately labeled continuation sheets. Schedule C Summary *Contributor Codes 1. Amount received this period – itemized nonmonetary contributions. IND - Individual 00.00 COM - Recipient Committee (Include all Schedule C subtotals.) \$ (other than PTY or SCC) 00.00 2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$ OTH - Other (e.g., business entity)

3. Total nonmonetary contributions received this period. 00.00

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees SEE INSTRUCTIONS ON REVERSE HAME OF FILER		Type or print Amounts may be to whole do	e rounded	from 10/22/ through 12/3	1/06 Page	CALIFORNIA 46 FORM 46 Page 10 of 16	
Committee	to Elect Steve Jarrett				128	7307	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DA' CALENDAR YEAR (JAN. 1 - DEC. 31)		
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
स्थानके नाम निर्माण क्षेत्र के स्थापन क्षेत्र के स्थापन क्षेत्र के स्थापन क्षेत्र के स्थापन कर पहुँच का स्थापन स्थापन स्थापन क्षेत्र का स्थापन क्षेत्र के स्थापन क्षेत्र के स्थापन क्षेत्र के स्थापन कर पहुँच का स्थापन क्षेत		agen and figure grant and the state of the engine of the e	SUBTOTAL	\$ 00.00			
Cabadula	D. Summanu		SUBTUIAL	\$ 00.00			
	D Summary contributions and independent expenditures made	e this period. (Include	e all Schedule D subtotals.).		************	\$	
	ed contributions and independent expenditures ma					00.0	

Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULEE CALIFORNIA Statement covers period FORM 10/22/06 from ___ 12/31/06 Page 11 of 16 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1287307 Committee to Elect Steve Jarrett

CMP campaign paraphernalia/misc. MBR mem CNS campaign consultants MTG meet CTB contribution (explain nonmonetary)* OFC office CVC civic donations PET petitic FIL candidate filing/ballot fees PHO phon FND fundraising events POL pollin IND independent expenditure supporting/opposing others (explain)* POS posta LEG legal defense PRO profe	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense MTG meetings and appearances office expenses petition circulating petition circulating phone banks phone banks phone banks postage, delivery and messenger services professional services (legal, accounting) TEL t.v. or cable airtime and contribution campaign workers' to ampaign worke						
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID				
Calvary Bible Church 18621 Highway 99 Acampo, Ca. 95220		СТВ	Sponsorship of a Hole at Youth Missions Fund Raiser Golf Tournament	100.00			
Staples 2415 W. Kettleman Ln. Lodi, Ca. 95242		OFC	Office Supplies	63.54			
Lowes 1389 S. Lower Sacramento Rd. Lodi, Ca. 95240		CMP	Rebar for Campaign Signs	8.32			
* Payments that are contributions or independent expenditures must also be	summa	arized on So	hedule D. SUBTOTAL\$	171.86			
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals 2. Unitemized payments made this period of under \$100			\$	00.00			
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)							

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	OUTILDOLL L (OUTIL)
Statement covers period	CALIFORNIA ACO
from1022/06	FORM 400
through12/31/06	Page12of16
	I.D. NUMBER
	1287307

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Committee to Elect Steve Jarrett

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)* PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services **PRO** professional services (legal, accounting) VOT voter registration LEG legal defense information technology costs (internet, e-mail) campaign literature and mailings PRT print ads WEB

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
D&S Press 1139 Enterprise Stockton, Ca. 95204	LIT	Campaign Brochure Mailer	734.00
Pre-Sort Center 3806 Coronado Ave Stockton, Ca. 95204	LIT	Mailing to Polling Place Voters	1250.00
Staples 2415 W. Kettleman Ln Lodi, Ca. 95242	OFC	Office Supplies, campaign sign repair supplies, copy costs, equipment repair	424.54
Lodi News-Sentinel 124 N. Church St. Lodi, Ca. 95240	PRT	Display Ads	1746.82
Pre-Sort Center 3806 Coronado Ave Stockton, Ca. 95204	LIT	Remainder of bill for mailing	109.39

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

SCHEDNIEF

Type or print in ink.

00.00	\$ SJATOT GIA9	231227 - CEP 1 1832 - VES 2 2 2 2 1 1 2 2 1 1 1 2 2	als for payments on (001\$ researched)	dule F, Column (c) subtot ayments on accrued expo	2. Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized p
00.00	\$ SJATOT GER	HOON	(.0018	cctued expenses under \$	1. Total accrued expenses incurred this period. (Include all So accrued expenses of \$100 or more, plus total unitemized a
			20, 3 0,040	ing (d) demiloo 3 dilbode	Schedule F Summary
00.00 \$	00.00	\$ 00.00	\$ 00.00	SUATOTAUS	* Payments that are contributions or independent expenditures must also be
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09 4 MAG		Statement covers	ре	iype or print in ink. Amounts may be rounde to whole dollars.	Schedule F Accrued Expenses (Unpaid Bills)

on the Summary Page, Column A, Line 9.)

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period from 10/22/06	CALIFORNIA 460
through12/31/06	Page 14 of 16
	1.D. NUMBER 1287307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Steve Jarrett

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MBR member communications CMP campaign paraphernalia/misc. MTG meetings and appearances RFD returned contributions CNS campaign consultants

CTB contribution (explain nonmonetary)* OFC office expenses petition circulating CVC civic donations PET FIL candidate filing/ballot fees PHO phone banks

POL polling and survey research FND fundraising events IND independent expenditure supporting/opposing others (explain)*

LEG legal defense LIT campaign literature and mailings

POS postage, delivery and messenger services PRO professional services (legal, accounting)

print ads

RAD radio airtime and production costs

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, odging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
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Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

									SCHEDULE
Schedule H Loans Made to Others*		Amounts m	print in ink. ay be rounded le dollars.		S tateme		ers period 2/06	CALIFORN FORM	⁴⁶⁰
SEE INSTRUCTIONS ON REVERSE					thro-ugh	12/	31/06	Page 15	of 16
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Committee to Elect Steve Jarrett								1287307	
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*Loans that are contributions to another candid	ate or committee	naka gilamin nashi sugalinin ili sakida gualifi ingazi gulan ili mami gilami nagazi sami							
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Schedule I Viscellaneous Increases to Cash SEE INSTRUCTIONS ON REVERSE VAME OF FILER		Amounts m	print in ink. ay be rounded le dollars.	from10	overs period 0/22/06 12/31/06	CALIFORNIA FORM 46 Page 16 of 16 I.D. NUMBER	
Committee to Elect Ste	eve Jarrett					1287307	
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	received this period on loans made to others. (Sci			\$.	00,00		
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FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)